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PTO/SB/21 (02-04) (AW 02/2004)
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/009,313
	Filing Date	April 19, 2002
Total Number of Pages in This Submission 10	First Named Inventor	Carl-Ludwig Graf von Deym et al.
	Art Unit	3653
	Examiner Name	Jonathan R. Miller
	Attorney Docket No.	SSM-492US

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Post Card
Remarks:		<div style="border: 1px solid black; padding: 5px;"> <p style="font-size: 24px; margin: 0;">RECEIVED</p> <p style="font-size: 18px; margin: 0;">JUL 09 2004</p> <p style="font-size: 24px; margin: 0;">GROUP 3600</p> </div>

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT			
Firm or Individual Name	Christian M. Bauer	Registration No. (Attorney/Agent)	51,443
Signature			
Date	June 28, 2004		

CERTIFICATE OF TRANSMISSION / MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date:			
Typed or printed name	Christian M. Bauer		
Signature		Date	June 28, 2004

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FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 9

Complete if Known

Application Number	10/009,313
Filing Date	April 19, 2002
First Named Inventor	Carl-Ludwig Graf von Deym et al.
Examiner Name	Jonathan R. Miller
Art Unit	3653
Attorney Docket No.	SSM-492US

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Other None
Order

Deposit Account (use as backup only):

Deposit Account Number: 18-0350

Deposit Account Name: RatnerPrestia

The Director is authorized to: (check all that apply)

Charge fee(s) indicated below

Credit any overpayments

Charge any additional fee(s) or any underpayment of fee(s)

Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION (continued)

3. ADDITIONAL FEES									
Large Entity Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description	Fee Paid				
1051	130	2051	65	Surcharge - late filing fee or oath					
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.					
1053	130	1053	130	Non-English specification					
1812	2,520	1812	2,520	For filing a request for ex parte reexamination					
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action					
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action					
1251	110	2251	55	Extension for reply within first month					
1252	420	2252	210	Extension for reply within second month					
1253	950	2253	475	Extension for reply within third month					
1254	1,480	2254	740	Extension for reply within fourth month					
1255	2,010	2255	1,005	Extension for reply within fifth month					
1401	330	2401	165	Notice of Appeal					
1402	330	2402	165	Filing a brief in support of an appeal					
1403	290	2403	145	Request for oral hearing					
1451	1,510	1451	1,510	Petition to institute a public use proceeding					
1452	110	2452	55	Petition to revive - unavoidable					
1453	1,330	2453	665	Petition to revive - unintentional					
1501	1,330	2501	665	Utility issue fee (or reissue)					
1502	480	2502	240	Design issue fee					
1503	640	2503	320	Plant issue fee					
1460	130	1460	130	Petitions to the Commissioner					
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)					
1806	180	1806	180	Submission of Information Disclosure Stmt					
8021	40	8021	40	Recording each patent assignment per property (times number of properties)					
1809	770	2809	385	Filing a submission after final rejection (37 CFR § 1.129(a))					
1810	770	2810	385	For each additional invention to be examined (37 CFR § 1.129(b))					
1801	770	2801	385	Request for Continued Examination (RCE)					
1802	900	1802	900	Request for expedited examination of a design application					

FEE CALCULATION

1. BASIC FILING FEE							
Large Entity Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description	Fee Paid		
1001	770	2001	385	Utility filing fee			
1002	340	2002	170	Design filing fee			
1003	530	2003	265	Plant filing fee			
1004	770	2004	385	Reissue filing fee			
1005	160	2005	80	Provisional filing fee			
SUBTOTAL (1)					(\$)	0	

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	21	-20**	=	1	X	Fee from below	9	=	9
Independent Claims	2	-3**	=	0	X			=	0
Multiple Dependent					X			=	0

Large Entity Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description	Fee Paid	
1202	18	2202	9	Claims in excess of 20		
1201	86	2201	43	Independent claims in excess of 3		
1203	290	2203	145	Multiple dependent claim, if not paid		
1204	86	2204	43	** Reissue independent claims over original patent		
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent		
SUBTOTAL (2)					(\$)	9

**or number previously paid, if greater; For Reissues, see above

RECEIVED JUL 09 2004

GROUP 3600

SUBMITTED BY		Complete (if applicable)			
Name (Print/Type)	Christian M. Bauer	Registration No. Attorney/Agent	51,443	Telephone	610-407-0700
Signature	<i>Christian M. Bauer</i>	Date	June 28, 2004		

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